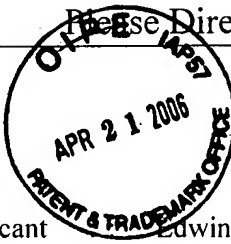


Please Direct All Correspondence to Customer Number **20995**



TRANSMITTAL LETTER

INFORMATION DISCLOSURE STATEMENT

Stan

Applicant **Edwin C. Iliff**

App. No : 10/828,793

Filed : April 20, 2004

For : AUTOMATED DIAGNOSTIC SYSTEM
AND METHOD

Examiner : Shubo Zhou

Art Unit : 1631

CERTIFICATE OF MAILING

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

April 18, 2006

(Date)

Raimond J. Salenieks

Raimond J. Salenieks, Reg. No. 37,924

Mail Stop Amendment

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Dear Sir:

Enclosed for filing in the above-identified application are:

(X) An Information Disclosure Statement and PTO/SB/08 equivalent listing references for consideration:

(X) Listing one reference.

(X) Enclosing one reference.

(X) The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Account No. 11-1410.

(X) Return prepaid postcard.

Raimond J. Salenieks

Raimond J. Salenieks

Registration No. 37,924

Agent of Record

Customer No. 20,995

(619) 235-8550

INFORMATION DISCLOSURE STATEMENT

Applicant : Edwin C. Iliff
App. No : 10/828,793
Filed : April 20, 2004
For : AUTOMATED DIAGNOSTIC
SYSTEM AND METHOD
Examiner : Shubo Zhou
Art Unit : 1631

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Raimond J. Salenieks, Reg. No. 37,924

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

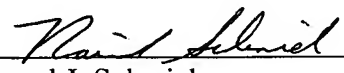
Enclosed for filing in the above-identified application is a PTO/SB/08 Equivalent listing one reference to be considered by the Examiner. Also enclosed is one foreign patent reference and/or non-patent literature as listed on the Information Disclosure Statement.

This Information Disclosure Statement is being filed before the receipt of a first Office Action on the merits, and presumably no fee is required. If a first Office Action on the merits was mailed before the mailing date of this Statement, the Commissioner is authorized to charge the fee set forth in 37 C.F.R. § 1.17(p) to Deposit Account No. 11-1410.

Respectfully submitted,

KNOBBE, MARTENS, OLSON & BEAR, LLP

Dated: April 18, 2006

By: 
Raimond J. Salenieks
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Agent of Record
Customer No. 20,995
(619) 235-8550



PTO/SB/08 Equivalent

**INFORMATION DISCLOSURE
STATEMENT BY APPLICANT**

(multiple sheets used when necessary)

SHEET 1 OF 1

Application No.	10/828,793
Filing Date	April 20, 2004
First Named Inventor	Edwin C. Iliff
Art Unit	1631
Examiner	Shubo Zhou
Attorney Docket No.	ILIFF.015A6D1

U.S. PATENT DOCUMENTS

Examiner Initials	Cite No.	Document Number Number - Kind Code (if known) Example: 1,234,567 B1	Publication Date MM-DD-YYYY	Name of Patentee or Applicant	Pages, Columns, Lines Where Relevant Passages or Relevant Figures Appear

FOREIGN PATENT DOCUMENTS

Examiner Initials	Cite No.	Foreign Patent Document Country Code-Number-Kind Code Example: JP 1234567 A1	Publication Date MM-DD-YYYY	Name of Patentee or Applicant	Pages, Columns, Lines Where Relevant Passages or Relevant Figures Appear	T ¹

NON PATENT LITERATURE DOCUMENTS

Examiner Initials	Cite No.	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ¹
	1.	Gale et al., <i>Medical Diagnosis From Student to Clinician</i> , page 1-22 (1983)	

2522409
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Examiner Signature

Date Considered

*Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

T¹ - Place a check mark in this area when an English language Translation is attached.